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Faxitron radiographs of both knees were obtained and knees were harvested and sectioned through the joint for histologic analysis. Joints were scored using a semi-quantitative scoring system by scorers blinded to group designation, with results expressed as both summed and maximal scores.

Results: Pharmacokinetic analysis demonstrated good systemic exposure of compound in MPI-369 treated animals. There were no compound-related adverse-effects. Histologic scoring revealed severe OA in the majority of STR/ort mice, with considerable variability in all groups. Radiographic osteophyte size correlated with the histologic severity. Male mice had significantly more advanced OA than female mice ($p=0.008$, 2-tailed T-test). Long-term (10 + months) treatment of mice with a potent broad-spectrum MMP-inhibitor did not affect severity of OA in this model. When the left and right knee OA scores were compared in 20 male mice, no correlation of either summed or maximal scores was observed.

Conclusions: In this study, long-term treatment with a potent broad-spectrum MMP-inhibitor did not affect progression of osteoarthritis. This finding contrasts to results published by Brewster et al. which described protection against progression of osteoarthritis in the STR/ort mouse after treatment with an inhibitor of MMP-1, -8, and -13. We observed higher levels of OA in males than in females, in agreement with the majority of the literature. Correlation of OA severity between left and right knees in the same animal. The lack of correlation between knees in the same animal in this study indicates that factors beyond genetics, circulating factors and weight are important in OA progression and highlight the huge variability in this model. Due to the large variability and lack of response to long-term therapy with a broad-spectrum MMP-inhibitor, we do not recommend use of the STR/ort model for disease modification studies.

79 OUTCOME OF MICROFRACTURE IN CHONDRAL DEFECTS IS MODULATED BY ANATOMIC SITE IN GOATS

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Purpose: Determine the effect of anatomic site on cartilage and bone response to microfracture in a caprine model.

Methods: Chondral defects (4.5 mm diameter) were created unilaterally in the medial femoral condyle and lateral patellar groove of eight adult goats. Tubular chisels were used to score the cartilage, and a curette was used to remove the articular and calcified cartilages. An awl (0.5 mm diameter micro bur) and hammer were used to create three holes in the subchondral bone. Perforations were made uniformly within the defect sites at an approximate depth of 2–3 mm, and bleeding from the holes and filling of the defect was observed in all animals. The animals were splinted for 2 weeks. The animals were sacrificed at 3 months and the defects were scored grossly [ICRS Cartilage Injury Evaluation Package] and histologically. Analysis of the bone was performed using microCT. Data were analyzed using ANOVA.

Results: After three months, the defects were filled with tissue (Figures 1A and 1D). The gross appearance of the microfracture-treated defects in the groove was significantly better than those in the condyle ($p=0.004$, Figure 2). The microfracture-treated defects in the groove were flush with adjacent cartilage and relatively smooth in appearance (Figure 1A). However, the microfractured-defects in the condyle were depressed in the center and showed evidence of fibrillation around the edges (Figure 1D). The tissues stained well with SafO, indicating cartilage formation (Figures 1B and 1E). The effect of site on histological scores did not reach the level of significance (based on analysis using ANOVA). The collapse or resorption of the subchondral bone under the defect was more prevalent in the condyle than the groove, as evidenced by the microCT images (Figure 1C and 1F). Additionally, there were indications of changes in the structure of the bone in both locations, with the density and morphology of the bone under the defect changing when compared to normal bone.

Conclusions: To the authors' knowledge, this study is the first to document the results of microfracture in a caprine model of chondral repair. It is also the first to demonstrate the importance of anatomical site on cartilage repair in this model. These results demonstrate cartilage restoration and relatively intact subchondral bone in the lateral groove of the goats, while bone collapse and/or resorption were observed in the femoral condyle. The differences due to site may be related to mechanical loading, differences in the thickness of the calcified cartilage and differences in the structure of the subchondral bone. The changes in the subchondral bone observed in both locations are consistent with those that have

been described after the creation of chondral defects in goats, so this phenomenon may be due to the creation of the defects and removal of the articular and calcified cartilage, not the creation of microchannels. The appropriate surgical technique to be used when doing microfracture on goats should be investigated further. Additionally, the effect of anatomical site on cartilage repair has not been extensively documented and needs to be further evaluated to better understand its importance in large animal pre-clinical models and how it may correlate with clinical outcomes in humans. The overall results of this study suggest the caprine microfracture model discussed may be appropriate in cartilage repair evaluations where microfracture is used as control or microfracture enhancements are tested.

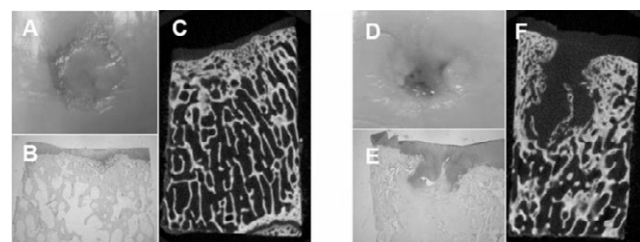


Figure 1. Representative images of the microfractured defects in the lateral trochlear groove (A–C) and medial femoral condyle (D–F) at 3 months. Gross images (A,D) SafO-stained sections at 10 \times (B,E) and microCT images (C,F) are shown.

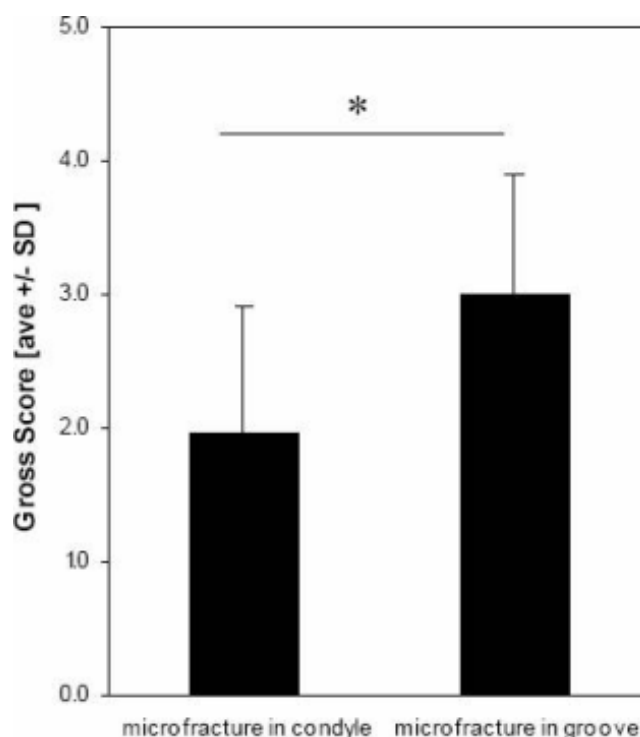


Figure 2. Gross scores for the microfracture-treated defects were significantly higher in the groove than the condyle ($p=0.004$). Data shown as average \pm SD and all anatomic sites combined ($n=8$).

80 A RABBIT KNEE MODEL OF CONTROLLED INSTABILITY

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Purpose: Joint instability associated with an ACL injury is a well-recognized risk factor that leads to post-traumatic OA in the human knee. Therefore, ACL transection (ACL-T) has been employed in several animal models to investigate post-traumatic OA. In ACL-T rabbit models, advanced OA (characterized by deep fibrillation and/or eburnation) predictably develops within 8 weeks of transection. Unfortunately, the severity